

***** STN Columbus *****
FILE 'HOME' ENTERED AT 11:22:08 ON 09 MAR 2006

=> Index biosci
FILE 'DRUGMONO2' ACCESS NOT AUTHORIZED
COST IN U.S. DOLLARS
FULL ESTIMATED COST
SINCE FILE TOTAL
ENTRY SESSION
0.21 0.21

INDEX 'ADISCTI, ADISINSIGHT, ADISNEWS, AGRICOLA, ANABSTR, ANTE, AQUALINE, AQUASCI, BIOENG, BIOSIS, BIOTECABS, BIOTECHDS, BIOTECNO, CABA, CAPLUS, CEABA-VTB, CIN, CONFSCI, CROPB, CROPU, DDFU, DGENE, DISSABS, DRUGB, DRUGMONO2, DRUGJ, EMBAL, EMBASE, ...' ENTERED AT 11:22:19 ON 09 MAR 2006

70 FILES IN THE FILE LIST IN STNINDEX

Enter SET DETAIL ON to see search term postings or to view
search error messages that display as 0* with SET DETAIL OFF.

=> (streptavidin (w) bind? (w) (protein or peptide)) or sbp
(STREPTAVIDIN IS NOT A RECOGNIZED COMMAND
The previous command name entered was not recognized by the system.
For a list of commands available to you in the current file, enter
"HELP COMMANDS" at an arrow prompt (=)).

=> 9 (streptavidin (w) bind? (w) (protein or peptide)) or sbp

1949 FILE ADISCTI
131 FILE ADISINSIGHT
53 FILE ADISNEWS
149 FILE AGRICOLA
19 FILE ANABSTR
13 FILE ANTE
8 FILE AQUALINE
57 FILE AQUASCI
71 FILE BIOENG
5297 FILE BIOSIS
105 FILE BIOTECABS
362 FILE BIOTECDS
13 FILES SEARCHED...

624 FILE CABA
3769 FILE CAPLUS
25 FILE CEABA-VTB
53 FILE CIN
23 FILE CONFSCI
8 FILE CROPB
27 FILE CROPU
3 FILE DDFU
1358 FILE DGENE
22 FILES SEARCHED...
914 FILE DGENE
23 FILES SEARCHED...
397 FILE DISSABS
3 FILE DRUGB
2750 FILE DRUGJ
98 FILE EMBAL

5786 FILE EMBASE
1857 FILE ESIIOBASE
30 FILES SEARCHED...

92 FILE FEDRIP
24 FILE FROST
57 FILE FSTA
675 FILE GENBANK
30 FILE HEALSAFE
37 FILES SEARCHED...

267 FILE IFIPAT
10 FILE IMSDRUGS
5 FILE IMRSRCH
774 FILE JICST-EPLUS
1 FILE KOSMET
308 FILE LIFESCI
6060 FILE MEDLINE
41 FILE NIOSHTIC
64 FILE NPTS
1 FILE NOTRACEUT
12 FILE OCEAN
3547 FILE PASCAL
15 FILE PHAR
6 FILE PHARMATL
8 FILE PHIN
463 FILE PROMT

56 FILES SEARCHED...
4 FILE RDISCLOSURE
4197 FILE SCISEARCH
2057 FILE TOXCENTER
1882 FILE USPATFULL
172 FILE USPAT2
2 FILE VETB
18 FILE VETU
13 FILE WATER
67 FILES SEARCHED...

294 FILE WPIDS
1 FILE WRITV
294 FILE WPINDEX

61 FILES HAVE ONE OR MORE ANSWERS, 70 FILES SEARCHED IN STNINDEX

L1 QUE (STREPTAVIDIN (W) BIND? (W) (PROTEIN OR PEPTIDE)) OR SBP

=> s l1 (p) (affinity (w) tag)

0* FILE ADISNEWS
0* FILE ANTE
0* FILE AQUALINE
1* FILE BIOENG
1 FILE BIOSIS
8* FILE BIOTECABS
8* FILE BIOTECDS
1* FILE BIOTECNO
13 FILES SEARCHED...
2 FILE CAPLUS
0* FILE CEABA-VTB
0* FILE CIN
22 FILES SEARCHED...

```

6 FILE DGENE
23 FILES SEARCHED...
1 FILE EMBASE
1* FILE ESHIOBASE
0* FILE FEDRIP
0* FILE FOMAD
0* FILE FOREGE
0* FILE FROSTI
34 FILES SEARCHED...
0* FILE FSTA
15 FILE IFIPAT
0* FILE KOMET
1 FILE LIFESCI
1 FILE MEDLINE
0* FILE NTIS
0* FILE NUTRACEUT
1* FILE PASCAL
0* FILE PHARMAML
53 FILES SEARCHED...
1 FILE SCISEARCH
392 FILE USPATFILL
48 FILE USPAT2
0* FILE WATER
7 FILE WPIDS
68 FILES SEARCHED...
7 FILE WPINDEX

18 FILES HAVE ONE OR MORE ANSWERS, 70 FILES SEARCHED IN STNINDEX

L2 QUE L1 (P) (AFFINITY (W) TAG)

=> s l2 and (two or several or multiple or plural or tandem)
'PLURALORTANDEM' IS NOT VALID HERE
PLURALS can be set to values 'ON' or 'OFF'. For more information
enter "HELP SET PLURALS" at an arrow prompt (=>).

=> s l2 and (two or several or multiple or "plural" or tandem)
0* FILE ADISNEMS
0* FILE ANTE
0* FILE AQUALINE
0* FILE BIDENG
5* FILE BIOTECHABS
5* FILE BIOTECHDS
0* FILE BIOTECHNO
13 FILES SEARCHED...
0* FILE CEABA-VTB
0* FILE CIN
22 FILES SEARCHED...
4 FILE DGENE
23 FILES SEARCHED...
0* FILE ESHIOBASE
0* FILE FEDRIP
31 FILES SEARCHED...
0* FILE FOMAD
0* FILE FOREGE
0* FILE FROSTI
0* FILE FSTA

```

```

9 FILE IFIPAT
0* FILE KOMET
0* FILE NTIS
0* FILE NUTRACEUT
0* FILE PASCAL
50 FILES SEARCHED...
0* FILE PHARMAML
392 FILE USPATFILL
48 FILE USPAT2
0* FILE WATER
2 FILE WPIDS
68 FILES SEARCHED...
2 FILE WPINDEX

8 FILES HAVE ONE OR MORE ANSWERS, 70 FILES SEARCHED IN STNINDEX

L3 QUE L2 AND (TWO OR SEVERAL OR MULTIPLE OR "PLURAL" OR TANDEM)

=> file hits
COST IN U.S. DOLLARS
FULL ESTIMATED COST
SINCE FILE ENTRY SESSION
9.15 9.36

FILE 'USPATFILL' ENTERED AT 11:31:28 ON 09 MAR 2006
CA INDEXING COPYRIGHT (C) 2006 AMERICAN CHEMICAL SOCIETY (ACS)

FILE 'USPAT2' ENTERED AT 11:31:28 ON 09 MAR 2006
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FILE 'BIOTECHABS' ACCESS NOT AUTHORIZED

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FILE 'WPINDEX' ACCESS NOT AUTHORIZED

=> s l3
PROXIMITY OPERATOR LEVEL NOT CONSISTENT WITH
FIELD CODE - 'AND' OPERATOR ASSUMED 'L1 (P)'
5 FILES SEARCHED...
L4 460 L3

=> dup rem l4
DUPLICATE IS NOT AVAILABLE IN 'DGENE'.
ANSWERS FROM THESE FILES WILL BE CONSIDERED UNIQUE
PROCESSING COMPLETED FOR L4
L5 400 DUP REM L4 (60 DUPLICATES REMOVED)

```

```

=> s 15 and ((calmodulin (w) bind? (w) (protein or peptide)) or cbp
UNMATCHED LEFT PARENTHESES 'AND ((CALMODULI
The number of right parentheses in a query must be equal to the
number of left parentheses.

=> s 15 and (calmodulin (w) bind? (w) (protein or peptide)) or cbp
5 FILES SEARCHED...
L6 5063 L5 AND (CALMODULIN (W) BIND? (W) (PROTEIN OR PEPTIDE)) OR CBP

=> dup rem 16
DUPLICATE IS NOT AVAILABLE IN 'DGENE'.
<-----User Break----->

=> s 15 and ((calmodulin (w) bind? (w) (protein or peptide)) or cbp)
UNMATCHED LEFT PARENTHESES 'AND (('
The number of right parentheses in a query must be equal to the
number of left parentheses.

=> s 15 and (calmodulin (w) bind? (w) (protein or peptide)) or cbp)
L5 IS NOT A RECOGNIZED COMMAND
The previous command name entered was not recognized by the system.
For a list of commands available to you in the current file, enter
"HELP COMMANDS" at an arrow prompt (=>).

=> s 15 and (calmodulin (w) bind? (w) (protein or peptide)) or cbp)
5 FILES SEARCHED...
L7 129 L5 AND ((CALMODULIN (W) BIND? (W) (PROTEIN OR PEPTIDE)) OR
(CBP)

=> dup rem 17
DUPLICATE IS NOT AVAILABLE IN 'DGENE'.
ANSWERS FROM THESE FILES WILL BE CONSIDERED UNIQUE
PROCESSING COMPLETED FOR L7
L8 129 DUP REM L7 (0 DUPLICATES REMOVED)

=> d 18 trial 1

L8 ANSWER 1 OF 129 USPATFULL ON STN
TI 2006:3470 USPATFULL
INCL Solidole Zcytor14, anti-Zcytor14 antibodies and binding partners and
methods of using in inflammation
INCLM: 424/143.100
INCLS: 514/012.000; 530/350.000; 530/388.220; 435/069.100; 435/320.100;
NCLM: 424/143.100
NCLS: 514/012.000; 530/350.000; 530/388.220; 435/069.100; 435/320.100;
IC IPCI A6IK0038-17 (I,A); C07K0014-715 (I,A); C07K0016-28 (I,A)
GI SECTION PAGES FORMAT SIZE
FRONT PAGE 1 PAGE.FP 30K
DESCRIPTION 2-103 PAGE.DESC 7665K
CLAIMS 103-104 PAGE.CLM 159K
COMPLETE 1-104 PAGE.ATL 7787K

Use PAGE(n) to retrieve a specific page

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```

=> d 18 trial 100

L8 ANSWER 100 OF 129 USPATFULL ON STN
AN 2002:259572 USPATFULL
TI Human vomeronasal receptor-4
INCL INCLM: 530/350.000
INCLS: 530/388.220; 435/069.100; 435/320.100; 435/325.000; 536/023.500
NCLM: 530/350.000
NCLS: 435/069.100; 435/320.100; 435/325.000; 530/388.220; 536/023.500
IC 171
ICM C07K014-705
ICS C07H021-04; C12P021-02; C12N005-06; C07K016-28
IPCI C07K0014-705 (ICM,7); C07H0021-04 (ICS,7); C12P0021-02 (ICS,7);
C12N005-06 (ICS,7); C07K0016-28 (ICS,7)
IPCR C07K0014-435 (I,C); C07K0014-705 (I,A)
PAGE IMAGES NOT AVAILABLE FOR THIS PATENT

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=> log h
COST IN U.S. DOLLARS          SINCE FILE ENTRY SESSION
FULL ESTIMATED COST          20.25          29.61

SESSION WILL BE HELD FOR 60 MINUTES
STN INTERNATIONAL SESSION SUSPENDED AT 11:38:46 ON 09 MAR 2006

Connecting via Winsock to STN

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Welcome to STN International! Enter x:x
LOGINID:sesptel653raw

PASSWORD:
TERMINAL (ENTER 1, 2, 3, OR ?):2

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***** Welcome to STN International *****
NEWS 1 Web Page URLs for STN Seminar Schedule - N. America
NEWS 2 "Ask CAS" for self-help around the clock
NEWS 3 IPC search and display fields enhanced in CA/ChemPlus with the
NEWS 4 IPC reform
NEWS 5 New IPC8 SEARCH, DISPLAY, and SELECT fields in USPATFULL/
NEWS 6 USPAT2
NEWS 7 IPC 8 searching in IFIPAT, IFIUDB, and IFICDB
NEWS 8 Pre-1988 INPI data added to MASPAT
NEWS 9 IPC 8 in the WPI family of databases including WPIFV
NEWS 10 Saved answer limit increased
NEWS 11 Monthly current-awareness alert (SDI) frequency
NEWS 12 added to TULSA
NEWS 13 STN Analyst, Version 1.1, lets you share your STN Analyst

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NEWS 12 FEB 22 visualization results
NEWS 13 FEB 22 Status of current WO (PCT) information on STN
NEWS 14 FEB 22 The IPC thesaurus added to additional patent databases on STN
NEWS 15 FEB 27 Updates in EPFULL; IPC 8 enhancements added
NEWS 16 FEB 27 New STN Anavist pricing effective March 1, 2006
NEWS 17 FEB 28 MEDLINE/LMEDLINE reload improves functionality
NEWS 18 FEB 28 TOXCENTER reload with enhancements
NEWS 19 MAR 01 REGISTRY/REGISTRY enhanced with more experimental spectral
NEWS 20 MAR 01 property data
NEWS 21 MAR 08 INSPEC reloaded and enhanced
NEWS 22 MAR 22 Updates in PATDPA; addition of IPC 8 data without attributes
NEWS 23 MAR 22 X.25 communication option no longer available after June 2006
NEWS 24 APR 03 EMBASE is now updated on a daily basis
NEWS 25 APR 03 New IPC 8 fields and IPC thesaurus added to PATDPAFULL
NEWS 26 APR 03 Bibliographic data updates resume; new IPC 8 fields and IPC
NEWS 27 APR 03 thesaurus added in PCTFULL
NEWS 28 APR 04 STN Anavist $500 visualization usage credit offered

NEWS EXPRESS FEBRUARY 15 CURRENT VERSION FOR WINDOWS IS V8.01a,
CURRENT MACINTOSH VERSION IS V6.0c(BNG) AND V6.0c(JP),
AND CURRENT DISCOVER FILE IS DATED 19 DECEMBER 2005.
V8.0 AND V8.01 USERS CAN OBTAIN THE UPGRADE TO V8.01a AT
http://download.cas.org/express/v8.0-Discover/

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FILE 'HOME' ENTERED AT 12:30:15 ON 07 APR 2006

=> Index bioact -dgene -uspatfull -uspat2 -fedrip
FILE 'DRUGMONO2' ACCESS NOT AUTHORIZED
COST IN U.S. DOLLARS SINCE FILE TOTAL
ENTRY SESSION
0.21 0.21

FULL ESTIMATED COST

INDEX 'ADISCTI, ADISINSIGHT, ADISNEWS, AGRICOLA, ANABSTR, ANTE, AQUALINE,
AQUASCI, BIOENG, BIOSIS, BIOTCHAS, BIOTCHDS, BIOTCHNO, CABA, CAPUS,
CEABA-VTB, CIN, CONFSCI, CROPB, CROPU, DDFB, DDFU, DISSABS, DRUGB,
DRUGMONO2, DRUGU, EMBAL, EMBASE, ESBIOBASE, ...'

ENTERED AT 12:30:39 ON 07 APR 2006

66 FILES IN THE FILE LIST IN STNINDEX

Enter SET DETAIL ON to see search term postings or to view
search error messages that display as 0* with SET DETAIL OFF.

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=> s (streptavidin (w) bind? (w) (protein or peptide)) or sbp
1954 FILE ADISCTI
131 FILE ADISINSIGHT
53 FILE ADISNEWS
149 FILE AGRICOLA
19 FILE ANABSTR
13 FILE ANTE
8 FILE AQUALINE
58 FILE AQUASCI
71 FILE BIOENG
5327 FILE BIOSIS
109 FILE BIOTCHAS
109 FILE BIOTCHDS
362 FILE BIOTCHNO

13 FILES SEARCHED...
631 FILE CABA
3826 FILE CAPUS
25 FILE CEABA-VTB
34 FILE CIN
25 FILE CONFSCI
8 FILE CROPB
27 FILE CROPU
3 FILE DDFB
1363 FILE DDFU
397 FILE DISSABS
3 FILE DRUGB
2758 FILE DRUGU
114 FILE EMBAL
5862 FILE EMBASE
1895 FILE ESBIOBASE

29 FILES SEARCHED...
24 FILE FPROST
59 FILE FSTA
680 FILE GENBANK
30 FILE HEALSAFE
271 FILE ITIPAT
11 FILE INSURGENS
6 FILE INSURSEARCH
776 FILE JICST-EPJUS
1 FILE KOSMET
309 FILE LIFESCI
6113 FILE MEDLINE
41 FILE NIOSHTIC
64 FILE NTIS
1 FILE NUTRACEUT
12 FILE OCEAN
3568 FILE PASCAL
15 FILE PHAR
6 FILE PHARMANTL

51 FILES SEARCHED...
8 FILE PHIN
472 FILE PROMT
4 FILE RDISCLOSURE
4262 FILE SCISEARCH
2078 FILE TOXCENTER
2 FILE VETB
18 FILE VETU

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13 FILE WATER
296 FILE WPIDS
1 FILE WPITV
65 FILES SEARCHED...
296 FILE WPINDEX

57 FILES HAVE ONE OR MORE ANSWERS, 66 FILES SEARCHED IN STINDEX

L1 QUE (STREPTAVIDIN (W) BIND? (W) (PROTEIN OR PEPTIDE)) OR SBP
=> s (calmodulin (w) bind? (w) (protein or peptide)) or cbp
12 FILE ADISCTI
7 FILE ADISINSIGHT
8 FILE ADISNEMS
123 FILE AGRIOLA
63 FILE ANABSTR
3 FILE ANTE
7 FILE AQUALINE
32 FILE AQUASCI
102 FILE BIOENG
3400 FILE BIOSIS
150 FILE BIOTECHABS
150 FILE BIOTECHDS
1595 FILE BIOTECHNO
13 FILES SEARCHED...
287 FILE CARA
4239 FILE CAPUS
20 FILE CEABA-VTB
29 FILE CIN
62 FILE CONFSCI
32 FILE CROPU
2 FILE DDFR
243 FILE DDFU
313 FILE DISSABS
2 FILE DRUGB
1 FILE DRUGXNOG2
329 FILE DRUGU
41 FILE EMBAL
3038 FILE EMBASE
28 FILES SEARCHED...
1948 FILE ESHIOBASE
10 FILE FROSTI
42 FILE FSTA
11050 FILE GENBANK
7 FILE HEALSAFE
384 FILE IPIPAT
19 FILE IMSDRUGNEMS
1 FILE IMSPRODUCT
5 FILE IMSRESEARCH
1021 FILE JICST-EPLUS
1644 FILE LIFESCI
2932 FILE MEDLINE
13 FILE NIOSHTIC
115 FILE NTIS
7 FILE OCEAN
972 FILE PASCAL
48 FILES SEARCHED...

5 FILE PHAR
4 FILE PHARMATL
1 FILE PHIC
35 FILE PHIN
714 FILE PROMT
3 FILE PROUDR
3680 FILE SCISEARCH
1103 FILE TOXCENTER
3 FILE VETU
18 FILE WATER
260 FILE WPIDS
1 FILE WPITV
260 FILE WPINDEX

56 FILES HAVE ONE OR MORE ANSWERS, 66 FILES SEARCHED IN STINDEX

L2 QUE (CALMODULIN (W) BIND? (W) (PROTEIN OR PEPTIDE)) OR CBP
=> s l1 and l2
1 FILE ANABSTR
1 FILE BIOENG
8 FILE BIOSIS
4 FILE BIOTECHABS
4 FILE BIOTECHDS
1 FILE BIOTECHNO
13 FILES SEARCHED...
12 FILE CAPUS
1 FILE CEABA-VTB
1 FILE DDFU
1 FILE DISSABS
3 FILE DRUGU
12 FILE EMBASE
2 FILE ESHIOBASE
29 FILES SEARCHED...
6 FILE GENBANK
3 FILE IPIPAT
2 FILE JICST-EPLUS
1 FILE LIFESCI
10 FILE MEDLINE
1 FILE NTIS
8 FILE PASCAL
48 FILES SEARCHED...
8 FILE SCISEARCH
5 FILE TOXCENTER
4 FILE WPIDS
64 FILES SEARCHED...
4 FILE WPINDEX

24 FILES HAVE ONE OR MORE ANSWERS, 66 FILES SEARCHED IN STINDEX

L3 QUE L1 AND L2
=> d rank
F1 12 CAPUS
F2 12 EMBASE
F3 10 MEDLINE
F4 8 BIOSIS

```

F5 8 PASCAL
 F6 8 SCISEARCH
 F7 6 GENBANK
 F8 5 TOXCENTER
 F9 4 BIOTCHABS
 F10 4 BIOTCHABS
 F11 4 WPIDS
 F12 4 WPINDEX
 F13 3 DRUGJ
 F14 3 IFIPAT
 F15 2 ESIIOBASE
 F16 2 JICST-EPLUS
 F17 1 ANABSTR
 F18 1 BIOENG
 F19 1 BIOTCHNO
 F20 1 CEABA-VTB
 F21 1 DDFU
 F22 1 DISSABS
 F23 1 LIFESCI
 F24 1 NTIS

=> file hits
 COST IN U.S. DOLLARS
 FULL ESTIMATED COST
 SINCE FILE ENTRY 4.88
 TOTAL SESSION 5.09

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=> 9 13
 9 FILES SEARCHED...
 13 FILES SEARCHED...
 20 FILES SEARCHED...
 L4 94 13

=> dup rem 14
 DUPLICATE IS NOT AVAILABLE IN 'GENBANK'.
 ANSWERS FROM THESE FILES WILL BE CONSIDERED UNIQUE
 PROCESSING COMPLETED FOR L4
 L5 39 DUP REM L4 (55 DUPLICATES REMOVED)

```

=> s 15 and py<-2003
<-----User Break----->
<-----User Break----->
=> sort 15
SORT ENTIRE ANSWER SET? (Y)/N:Y
ENTER SORT FIELDS AND SORT DIRECTION, OR (?) :PY
'PY' IS NOT A VALID SORT FIELD IN FILE 'GENBANK'
The sort fields available in the current file are:
DATE ---- Date
DEF ----- Definition
GEN ----- Genbank Accession Number
LOC ----- Locus
OCC ----- Occurrence count of search terms in answer record
ORGN ----- Organism Name
RN ----- CAS Registry Number
SQL ----- Sequence Length
ENTER SORT FIELDS AND SORT DIRECTION, OR (?) :date
'DATE' IS NOT A VALID SORT FIELD IN FILE 'NTIS'
The sort fields available in the current file are:
AI ----- Application Information
AU ----- Author
IN ----- Inventor
AV ----- Availability (of document)
CC ----- Classification Code
CS ----- Corporate Source
PA ----- Patent Assignee
CY ----- Country (of publication)
DT ----- Document Type
LA ----- Language
NC ----- Number of Contrac
NR ----- Number of Report
OS ----- Other Source
PD ----- Publication Date
PI ----- Patent Information
PY ----- Publication Year
RN ----- Registry Number
TI ----- Title
UP ----- Update Date
WC,T ---- Word Count, Title
ENTER SORT FIELDS AND SORT DIRECTION, OR (?) :end

=> file f1-f6
COST IN U.S. DOLLARS

FULL ESTIMATED COST

SINCE FILE
ENTRY SESSION
65.94 71.03

FILE 'CAPLUS' ENTERED AT 12:38:54 ON 07 APR 2006
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FILE 'MEDLINE' ENTERED AT 12:38:54 ON 07 APR 2006

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FILE 'SCISEARCH' ENTERED AT 12:38:54 ON 07 APR 2006
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<-----User Break----->

SEARCH ENDED BY USER

=> s 13
L6 58 L3

=> dup rem 16
PROCESSING COMPLETED FOR L6
L7 24 DUP REM L6 (34 DUPLICATES REMOVED)

=> sort 17
SORT ENTIRE ANSWER SET? (Y)/N:Y
ENTER SORT FIELDS AND SORT DIRECTION, OR (?) :PY
PROCESSING COMPLETED FOR L7
L8 24 SORT L7 PY

=> d 18 b1b ab 1-24

L8 ANSWER 1 OF 24 CAPLUS COPYRIGHT 2006 ACS ON STN
AN 1983:534187 CAPLUS
DN 99:134187
TI Studies on experimental coronary insufficiency. Effects of
glucose-insulin-potassium (GIK) solution and of propranolol on myocardial
ischemia produced by intracoronary infusion of adrenaline and
noradrenaline in dog hearts with severe coronary constriction
AU Ohno, Katsuyuki; Shoji, Tetsuro; Yoshida, Shigeo
CS Dep. Intern. Med., Sapporo Med. Coll., Sapporo, Japan
SO Sapporo Igaku Zasshi (1983), 52(4), 417-33
CODEN: SIZSAR; ISSN: 0036-472X
DT Journal
LA Japanese
AB The effects of a soln. of glucose, [50-99-7]-insulin [9004-10-8]-K (GIK)
and of propranolol (Prop) [525-66-6] on metabolic and mech. responses to
an intracoronary infusion of adrenaline (Ad) [51-43-4] or noradrenaline
(NA) [31-41-2] were investigated in dogs with a coronary blood flow (CBF)
of .10req.50% of the control value. Both GIK and Prop inhibited the
decrease in mean coronary artery pressure (m- ***CBP*** ) produced by
severe coronary constriction. Prop suppressed the decrease in the
arterio-coronary sinus difference in lactate [50-21-5] (.DELTA.L) and in
K (.DELTA.K), the lactate extr. ratio (.DELTA.L/La), and the elevation of
lactate/pyruvate [127-17-3] ratio in coronary sinus blood (L/Pcs) by
severe constriction of the coronary artery. In the coronary-constricted
dogs, both GIK and Prop inhibited the decrease of .DELTA.L, .DELTA.L/La,

```

and .DELTA.K and the elevation of left ventricular end-diastolic pressure following intracoronary administration of Ad. Prop also suppressed the increase of L/Pcs. GIK inhibited the fall of m-***CBP*** and mean systemic arterial pressure (m-***SBP***) following intracoronary infusion of Ad. Both GIK and Prop markedly suppressed or improved the augmentation of ischemic change in ECG-ST following Ad. Following intracoronary infusion of NA, Prop showed a tendency to improve myocardial metab. Including suppression of increases in L/Pcs. It also brought about a remarkable improvement in the ischemic change in ECG-ST. However, metabolic and mech. responses to NA were not clearly influenced by GIK. Thus, myocardial ischemia may be provoked by an augmentation of myocardial metab. following Ad and similarly, cardiac function following NA in the dog heart with severe coronary constriction. Both GIK and Prop improve the deterioration of cardiac performance, myocardial metab., and the augmentation of ischemic change on ECG-ST following Ad. However, following NA, Prop shows a remarkable effect on myocardial ischemia through suppression of both augmented cardiac function and myocardial metab. produced by NA, whereas GIK had no effect in these animals.

L8 ANSWER 2 OF 24 MEDLINE on STN
AN 84133298 MEDLINE
DN Published ID: 6538134
TI Physiologic properties of steroid hormone-binding proteins in avian blood.
AU Wingfield J C; Matt K S; Farmer D S
NC GM 07270-06 (NIGMS)
SO General and comparative endocrinology. (1984 Feb) Vol. 53, No. 2, pp. 281-92.
CY Journal code: 0370735. ISSN: 0016-6480.
DT United States
LA English
FS Journal: Article; (JOURNAL ARTICLE)
EM 198404
ED Entered STN: 19900319
AB Last Updated on STN: 19970203
Entered Medline: 19840425

The physiologic properties of steroid hormone-binding proteins have been partially characterized in plasmas of 23 avian species (8 orders and 12 families). A specific sex hormone-binding protein (***SBP***) with high affinity and low capacity, as found in amphibians and some reptiles and mammals, could not be identified in any of the avian species investigated. In addition ***SBP*** appeared to be totally absent in the blood of posthatching and juvenile stages of two species, and in the embryonic blood of three species. For birds it is concluded that sex steroid hormones circulate bound to plasma albumins with low affinity ($K_d = 10(-5)$ mol/liter) and very high capacity. There are two protein-binding systems for corticosterone in the blood of all species investigated, including samples collected from embryos. One is saturable and specific with low capacity (10(-8) -10(-9) mol/liter) and high affinity ($K_d = 10(-7)$ -10(-9) mol/liter), whereas the other is a nonspecific component with very high capacity and low affinity ($K_d = 10(-5)$ mol/liter). Specifically studies show that the high-affinity binding system for corticosterone also binds progesterone with virtually identical affinity, whereas testosterone and estradiol are bound with lower affinity. These data suggest that the high-affinity binding protein in avian blood has physiologic properties similar to mammalian corticosteroid-binding globulin (***CBP***).

L8 ANSWER 3 OF 24 BIOSIS COPYRIGHT (c) 2006 The Thomson Corporation on STN
AN 1985:419346 BIOSIS
DN PREV19850089338; BABO:89338
TI ROLE OF THE BRAIN STEM AFFECTING THE TONUS OF THE CEREBRAL BLOOD VESSELS.
AU HANBA Y (Reprint author); HAYASHI M; YABUKOTO S
CS DEP NEUROSURGERY, FUKUI MED SCH, 23 SHIMOMAIZUKI, MATSUOKA-CHO,
YOSHIDA-GUN, FUKUI 910-11
SO Neurologia Medico-Chirurgica. (1985) Vol. 25, No. 5, pp. 327-332.
ISSN: 0367-2572.
DT Article

BA JAPANESE
LA Neurogenic factors for the tonus of the cerebral blood vessels were investigated by systemic administration of phenolamine (PH) and norepinephrine (NE) in lightly anesthetized and immobilized dogs. Systemic blood pressure (***SBP***), intracranial pressure (ICP) and cerebral blood flow (CBF) were recorded simultaneously. Reversible blocking of the brain function was produced by a local injection of 4% lidocaine hydrochloride. Elevation of ICP to a certain value was produced by continuous intracisternal infusion of saline. In the control experiment, administration of PH produced a decrease in ***SBP*** and in ***CBP***, and a rise in ICP. Administration of NE produced biphasic rises in ***SBP*** and a temporary rise followed by a decrease in ICP and increase in CBF. This pattern of changes became more marked at a raised ICP level of 30-40 mmHg. Blocking of the hypothalamus did not change the pattern of ***SBP*** and ICP fluctuations after administration of drugs, compared with the control experiment. In animals with blocking of the midbrain, pons and medulla, ICP showed a simultaneous change with ***SBP*** after administration of drugs and 0.2-0.3 ml lidocaine hydrochloride injection into each region was necessary to make these simultaneous changes in ***SBP*** and ICP. The tonus of the cerebral blood vessels may be controlled by the broad areas of brain stem.

L8 ANSWER 4 OF 24 PASCAL COPYRIGHT 2006 INIST-CNRS. ALL RIGHTS RESERVED.
ON STN
AN 1991-0197953 PASCAL
TI Levels of steroid-binding proteins and steroids in human preovulatory follicle fluid and serum as predictors of success in in vitro fertilization-embryo transfer treatment
AU ANDERSEN C. Y.
CS Rigshosp., dep. obstetrics gynecology, lab. reproductive biology, Copenhagen 2100, Denmark
SO Journal of Clinical Endocrinology and Metabolism. (1990), 71(5), 1375-1381, 19 refs.
ISSN: 0021-972X CODEN: JCEMAZ
DT Journal

BL Analytic
CY United States
LA English
AV INIST-6022, 35400015685920500
AB In an attempt to identify the embryos and cycles that have the best chances of resulting in establishment of pregnancies, after in vitro fertilization-embryo transfer (IVF-ET) treatment, the concentrations of sex hormone-binding globulin (SHBG) and cortisol-binding protein (***CBP***) were measured, using two new enzyme-linked immunosorbent assays in serum and follicle fluid (FF) from 30 women (125 FF) undergoing

IVF-EF. The concentrations were compared to those of total estradiol and total progesterone, and correlated to oocyte cleavage and the establishment of pregnancies

- L8 ANSWER 5 OF 24 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN
- AN 9108330 EMBASE
- DN 199108330
- T1 Antihypertensive effect of tiapamil from ambulatory and clinic methods. Blanchet D.G.; Corder C.N.; Kozel P.; Margolis R.; Jain A.; Ryan J.R.; McMahon F.G.
- CS St. Anthony Hospital Foundation, Oklahoma City, OK, United States
- SO International Journal of Clinical Pharmacology Therapy and Toxicology, (1991) Vol. 29, No. 2, pp. 59-63.
- CY ISSN: 0174-4879 CODEN: IJCBDX
- DT Germany
- FS Journal; Article
- LA Internal Medicine
- SI Cardiology
- ED Drug Literature Index
- AB 037 Adverse Reactions Index
- 038 Pharmacology
- 039
- LA English
- SI English
- ED Entered STN: 16 Dec 1991
- AB Last Updated on STN: 16 Dec 1991
- tiapamil (T), a calcium antagonist, was studied in hypertensive patients by 1) automatic monitor of blood pressure (AMB), and 2) cuff and sphygmomanometer blood pressure (***CBP***). Systolic (***SBP***), diastolic (DBP) pressures and heart rate were measured. Patients (n=8) received four weeks of placebo given twice daily. Baseline 24 h AMBP (wk 4), 147. +- 18 (***SBP***) and 91. +- 8 (DBP) mmHg; and ***CBP*** (wk 3 and 4), 152. +- 16 (***SBP***) and 102. +- 9 (DBP) were established. Then, patients received double-blind therapy (wk 5-10) of twice daily tablets of placebo (n=9); Level I T, 150-300 mg (n=4); or Level II T, 450-600 mg (n=5); 0 to 1,200 mg T/d. Significant responses, measured by AMBP (wk 10), were noted only at Level II T: ***SBP*** (-10.5 +- 12.4) and DBP (-5.6 +- 7.8) mmHg. However, ***CBP*** (wk 9 and 10) responded at Level I T (***SBP***, -7.7 +- 12.4/DBP, -5.8 +- 6.4) and Level II T (***SBP***, -8.8 +- 9.4/DBP, -9.7 +- 7.8 mmHg). There was minimal correlation (r=0.16) of pressure responses to T measured by 24-h AMBP versus ***CBP*** methods. Therefore, T effectively lowered ***SBP*** and DBP, but individual responses measured by AMBP did not predict those measured by ***CBP***. There was no effect of T on heart rate. Dizziness was noted in 12 percent of patients on T.
- L8 ANSWER 6 OF 24 MEDLINE on STN
- AN 92318035 MEDLINE
- DN Published ID: 1820438
- T1 Management of hypertensive outpatients: clinical evaluation of casual and 24-hour ambulatory blood pressure.
- AU Sawami K
- CS Sawami Medical Office, Osaka, Japan.
- SO Journal of nutritional science and vitaminology, (1991 Dec) Vol. 37 Suppl,

pp. S119-29.
Journal code: 0402640. ISSN: 0301-4800.

- CY Japan
- DT Journal; Article; (JOURNAL ARTICLE)
- LA English
- FS Priority Journals
- EM 199208
- ED Entered STN: 19920815
- AB Last Updated on STN: 19920815
- Entered Medline: 19920803
- Knowledge of daily blood pressure profiles is now an important factor in the management of hypertension. We recently analyzed the relationship of casual blood pressure (***CBP***) to 24-hour blood pressure (24-h BP) in 9 hypertensive patients and 11 normotensive subjects. A 24-hour ambulatory blood pressure monitoring apparatus (24-h ABPM, A & D Co.) was used to monitor 24-h BP. Data were divided into daytime mean blood pressure (daytime MBP), night mean blood pressure (night MBP), and 24-hour mean blood pressure (24-h MBP). In each subject, the 24-h ABP pattern was highly reproducible. Analysis of ***CBP*** disclosed that both the systolic blood pressure (***SBP***) and diastolic blood pressure (DBP) correlated more closely with 24-h MBP than with any other parameter. In view of the high incidence of cerebral infarction during night time or rest, prior knowledge of a blood pressure change pattern from daytime MBP to night MBP in individual patients is important in the prevention of this condition. The degree of decrease from daytime MBP to night MBP varied greatly among individuals, being higher in hypertensive patients than in normotensive subjects. The degree of this change in blood pressure was difficult to predict based on the ***CBP*** change pattern following postural change or 5-min rest. In some cases, 24-h ABPM data were within the hypertensive range (systolic greater than 160 mmHg, diastolic greater than 95 mmHg) for many hours, even though ***CBP*** was within the normal range. On the other hand, the duration of this sustained hypertensive level during 24-h ABPM was sometimes short, even in subjects with elevated ***CBP***. To deal with such discrepancies between ***CBP*** and 24-h ABPM, the duration of the sustained hypertensive level during 24-h ABPM should be given high priority in assessing the severity and prognosis of hypertension.
- L8 ANSWER 7 OF 24 PASCAL COPYRIGHT 2006 INIST-CNRS. ALL RIGHTS RESERVED.
- AN 1993-0078472 PASCAL
- T1EN Changes induced in serum protein profiles by ovarian stimulation during in-vitro fertilization-embryo transfer treatment: a comparison between conception and non-conception cycles
- AU ANDERSEN C. Y.; WESTERGAARD L. G.; TEISNER B.; BYSKOW A. G.; ZIEBE S.; HELLEDE L.; PETERSEN K.; WESTERGAARD J. G.
- CS Dep. obstetrics, lab. reproductive biology, 2100 Copenhagen, Denmark
- SO Human reproduction : (Oxford), (1992), 7(3), 585-591, refs. 1 p.
- ISSN: 0268-1161 CODEN: HUREEE
- DT Journal
- BL Analytic
- CY United Kingdom
- LA English
- AV INIST-21337, 35400028122960020
- L8 ANSWER 8 OF 24 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN

AN 96183780 EMBASE
DN 1996183780
TI Comparison of the effects of nifedipine GITS and amlodipine on essential hypertension.
AU Wang S.; Tao P.; Xu C.
CS Cardiovascular Institute, Fu Wei Hospital, CAMS Beijing 100037, China
SO Chinese Journal of Cardiology (1996) Vol. 24, No. 2, pp. 92-96.
ISSN: 0253-3758 CODEN: CHRCDF

CY China
DT Journal; Article
FS 006 Internal Medicine
018 Cardiovascular Diseases and Cardiovascular Surgery
030 Pharmacology
037 Drug Literature Index
038 Adverse Reactions Titles
LA Chinese
SL English; Chinese
ED Entered STN: 22 Jul 1996
AB In order to compare the efficacy, the time of the maximum effect, trough to peak ratios (T/P) of the antihypertensive effect and side-effects of nifedipine GITS (NI, i.e. adalat GITS) and amlodipine (AM), thirty patients with mild to moderate essential hypertension (sitting diastolic blood pressure, DBP, 95-114 mmHg) were investigated by randomized single-blind method with either NI (30-60 mg once-daily, n = 15) or AM (5 mg once-daily, n = 15) treatment for 4 weeks. Clinical blood pressure (***CBP***), heart rate (HR) and side-effects were assessed during the two weeks wash-out period on placebo, and after 1-, 2- and 4-week treatment. ***CBP*** and HR were measured at the same time at each visit between 8:00 to 9:00 o'clock. Ambulatory blood pressure monitoring (ABPM) was performed over a 24-hour period at baseline and at the end of both 2- and 4-weeks treatment. BP and HR were registered automatically at 20-min interval during day (from 06:00 to 22:00) and at 30-min interval during night (from 22:00 to 06:00) using Space-labs 90207. No significant difference was found in the effective rate between NI and AM group (100% vs 80%). ***CBP*** was significantly reduced by both treatment regimens. There was significant difference between the DBP decrease at the end of 2- and 4-weeks treatment with AM (-11.3 mmHg and -14.1 mmHg, p < 0.05), while there was no significant difference in NI group. Both drugs had no effect on the circadian rhythm of BP. The trough to peak ratios for ***SBP*** and DBP were more than 50% and greater in NI group than that in AM group. NI caused more side-effects than AM, such as edema and headache. No patient was of withdrawal due to side-effects. This study demonstrated that the efficacy of NI 30-60 mg once-daily was similar to that of AM 5 mg once-daily after 4 week treatment. The time of the maximum antihypertensive effect of AM (3-4 weeks) was much later than that of NI (1 week). Both NI and AM, which had sustained antihypertensive effect over a 24-hour period with an acceptable T/P ratio and no influence on circadian rhythm of BP, might be prospective antihypertensive drugs.

L8 ANSWER 9 OF 24 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN
AN 96171753 EMBASE
DN 1996171753
TI Home monitoring of blood pressure: limited value in general practice.
AU Stergiou G.S.; Malakos J.S.; Voulas A.V.; Achimastos A.D.; Moutokalakis T.D.

CS Hypertension Centre, Third University Department Medicine, Sotiria Hospital, 152 Mesogion Ave, Athens 11527, Greece
SO Journal of Human Hypertension, (1996) Vol. 10, No. 4, pp. 219-223.
ISSN: 0950-9240 CODEN: JHHYEN

CY United Kingdom
DT Journal; Article
FS 006 Internal Medicine
018 Cardiovascular Diseases and Cardiovascular Surgery
LA English
SL English
ED Entered STN: 3 Jul 1996
AB To investigate the reliability of home blood pressure (HBP) measurement as it is generally used in practice, we studied 50 consecutive newly referred hypertensive patients that were measuring HBP for at least 6 months before referral. No specific instructions on the technique of HBP measurement were given to the patients. HBP was compared to clinic BP (***CBP***) by using daytime ambulatory BP (ABP) as a reference method. The technique of HBP measurement used by the patients was assessed on the basis of a detailed questionnaire and the accuracy of the devices was tested against a mercury column. There was no difference between the degree of similarity of ABP with HBP or ***CBP*** (mean value of discrepancies and correlation coefficients) for systolic BP (***SBP***) and little difference for diastolic BP (DBP). However, the variability of discrepancies between HBP and ABP was equal to the corresponding variability between ***CBP*** and ABP, indicating that HBP was not better predictor of ABP than ***CBP***. Although patients measured HBP more frequently than generally recommended, poor standardisation of measurement and wrong technique were particularly common. In conclusion, in the present study HBP measurement offered no advantage over ***CBP*** in predicting ABP. The theoretical advantages of HBP may be partially offset by incorrect technique and less standardised conditions of measurement. Without patients education and regular maintenance of devices HBP offers no advantage over ***CBP*** and should not be used. (This article is based on data presented at the 7th European Hypertension Society Meeting in Milan, June 1995).

L8 ANSWER 10 OF 24 CAPLUS COPYRIGHT 2006 ACS on STN
AN 1997:770399 CAPLUS
DN 127:355189
TI A single-masked study comparing doxazosin and enalapril in patients with non-insulin-dependent diabetes mellitus and hypertension
AU Seedat, Yackob K.; Nalxer, Indiran P.
CS Department of Medicine, University of Natal, Durban, S. Afr.
SO Current Therapeutic Research (1997), 58(9), 633-652
CODEN: CTCRA9; ISSN: 0011-393X

PB Excerpta Medica
DT Journal
LA English
AB Angiotensin-converting enzyme (ACE) inhibitors are recognized as eminently suitable drugs for the treatment of hypertensive patients with non-insulin-dependent diabetes mellitus (NIDDM). They are metabolically neutral, may reduce insulin resistance, and are renoprotective. Long-acting alpha-blockers such as doxazosin are also metabolically neutral, effective antihypertensive agents. The objective of this study was to compare the efficacy and acceptability of doxazosin and the ACE inhibitor enalapril. We investigated the effects of these drugs on blood

pressure, diabetic control, lipid levels, renal function, and safety in patients with NIDDM (type II diabetes) and mild-to-moderate hypertension. Fifty-two patients with NIDDM and stable essential hypertension were randomized to two parallel groups. The study comprised three phases: placebo washout (4 wk), dose adjustment monotherapy of doxazosin 1 to 4 mg/d or enalapril 5 to 20 mg/d (8 wk), and maintenance (4 wk). Patients not controlled on monotherapy entered a 4-wk, open-label, dual-therapy phase before maintenance. Black patients were excluded, as were those with macroalbuminuria (urinary albumin > 3.5 g/24 h) and renal failure (serum creatinine > 150 μ mol/L). Variables being compared included crit. blood pressure (***CBP***) (ie, the lesser of mean sitting and standing diastolic blood pressure [DBP]), sitting and standing systolic blood pressure (***SBP***) and DBP, blood glucose (fasting and postprandial), serum cholesterol levels, serum triglyceride levels, body mass index (BMI), and electrocardiogr. (ECG) evidence of left ventricular hypertrophy. Patients in the doxazosin group exhibited a larger decrease in ***CBP*** (-11.3 vs -6.2 mm Hg), sitting (-9.9 vs -1.1) and standing ***SBP*** (-10.3 vs 0.0), and sitting (-12.2 vs -8.4) and standing DBP (-7.9 vs -0.8) compared with the enalapril group. The difference in the redn. in standing DBP was statistically significant, whereas the other differences did not reach statistical significance. No statistically significant differences were found between the groups in metabolic variables, BMI, or ECG findings. The metabolic profiles of enalapril and doxazosin were similar, except for a mild increase in serum triglyceride levels in the doxazosin group. However, the confidence index for the doxazosin-enalapril difference was wide, meaning that no conclusive statement can be made about the difference. Adverse events were common (26.3% doxazosin vs 42.3% enalapril), but none were serious. The doxazosin-treated patients showed a larger decrease in blood pressure on av. than patients receiving enalapril; apart from standing DBP, the differences were not statistically significant. This study has demonstrated that doxazosin is at least as effective as enalapril in decreasing blood pressure in patients with NIDDM and mild-to-moderate hypertension.

RE.CNT 25 THERE ARE 25 CITED REFERENCES AVAILABLE FOR THIS RECORD
ALL CITATIONS AVAILABLE IN THE RE FORMAT

L8 ANSWER 11 OF 24 CAPLUS COPYRIGHT 2006 ACS on STN
AN 1999:74846 CAPLUS
DN 130:332503
TI Antihypertensive effects of amlodipine on patients with essential hypertension complicated with diabetes
AU Zhou, Lei; Huang, Jun; Qian, Weichong; Ma, Benru; Wang, Haiyan; Zhou, Xingfang; Yang, Xiufen
CS Department of Cardiology, the First Affiliated Hospital, Nanjing Medical University, Nanjing, 210029, Peop. Rep. China
SO Nanjing Yike Daxue Xuebao (1998), 18(6), 484-487
CODEN: NYDXFS; ISSN: 1007-4368
PB Nanjing Yike Daxue
DT Journal
LA Chinese
AB The antihypertensive effects of Amlodipine (AM) on mild-to-moderate essential hypertensive patients (HT) (n = 24) and essential hypertensive patients complicated with diabetes (EHCD) (n = 13) were evaluated with 3-mo placebo-self-controlled trial. Trough to peak ratios (T/P) of the antihypertensive effect of AM in HT of EHCD patients, the clin. blood pressures (***CBP***) and ambulatory blood pressure monitoring (ABPM)

were obeyed. The results showed that the effective rates in both groups were 100% with no significant difference. The ambulatory recordings showed that AM maintained the diastolic and systolic pressure below baseline levels at every time point during the 24-h observation period and had no effect on the circadian rhythm of BP. The trough to peak ratios for ***SBP*** and DBP were both over 50%. Once-daily AM significantly lowered blood pressure. This effect was clearly showed by both the 24-h post-dosing readings and the 24-h ambulatory recordings. Once-daily AM is clearly efficacious for the full 24-h period of the day and well tolerated in mild-to-moderate hypertensive patients with/without diabetes.

L8 ANSWER 12 OF 24 CAPLUS COPYRIGHT 2006 ACS on STN
AN 1998:300465 CAPLUS
DN 129:13206
TI Library of recombinant vectors encoding ligand-binding peptides
IN Kay, Brian K.; Fowlkes, Dana M.; Adey, Nils B.; Sparks, Andrew B.
PA University of North Carolina at Chapel Hill, USA
SO U.S., 117 pp., Cont.-in-part of U.S. 5,498,338.
CODEN: USRXAM
DT Patent
LA English
FAN.CNT 4

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
PI US 5747334	A	19980505	US 1994-189331	19940131
US 5498338	A	19960312	US 1993-176500	19931230
CA 215185	AA	19940818	CA 1994-215185	19940201
WO 9418318	C	20010605		
W: CA, JP, KR	A1	19940818	WO 1994-US977	19940201
RM: AT, BE, CH, DE, DK, ES, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE	A1	19960103	EP 1994-907345	19940201
EP 689590	A1	19960103	EP 1994-907345	19940201
R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE	T2	19960716	JP 1994-518106	19940201
JP 08506487	B2	20010917		
JP 3210342	B2	20010917		
WO 9520601	A1	19950803	WO 1995-US1286	19950131
W: AM, AU, BE, BG, BR, BY, CA, CN, CZ, DE, DK, ES, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, SD, SI, SK, TJ, UA, UZ, VN	A1	19950803		
RM: KE, MW, SD, SZ, AT, BE, CH, DE, DK, ES, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, BF, BJ, CF, CG, CI, CM, GA, GN, ML, MR, NE, SN, TD, TG	A1	19950815	AU 1995-17383	19950131
AU 9517383	A1	19950815	AU 1995-17383	19950131
US 5935823	A	19990810	US 1995-420945	19950411
US 5625033	A	19970429	US 1995-471052	19950606
US 5844076	A	19981201	US 1995-471939	19950606
US 5852167	A	19981222	US 1995-471800	19950606
US 5948635	A	19990907	US 1995-471068	19950606
PRAI US 1990-480420	B1	19900215		
US 1992-854133	B2	19920319		
US 1993-13416	B1	19930201		
US 1993-176500	A2	19931230		
US 1993-22236	B1	19930225		
US 1994-189331	A	19940131		
WO 1994-US977	W	19940201		
WO 1995-US1286	W	19950131		

AB A method for producing novel and/or improved heterofunctional binding

fusion proteins termed Totally Synthetic Affinity Reagents (TSARs) is disclosed. TSARs are concatenated heterofunctional proteins, polypeptides or peptides comprising at least two functional regions: a binding domain with affinity for a ligand and a second effector peptide portion that is chem. or biol. active. In one embodiment, the heterofunctional proteins, polypeptides or peptides further comprise a linker peptide portion between the binding domain and the second active peptide portion. The linker peptide can be either susceptible or not susceptible to cleavage by enzymic or chem. means. The ligand-binding proteins produced by the method of the invention are longer than those of prior art libraries. The library is constructed by annealing two partially complementary DNA fragments, filling in with DNA polymerase to create a double-stranded DNA, digestion with restriction enzymes, and ligation of the synthetic gene fragments into vectors. Except for certain amino acids which result from the need to provide restriction sites and complementary regions for annealing of the two DNA fragments, the sequence of the resulting (poly)peptide is completely random (if desired). The choice of nucleotides for the random sequence results in low incidence of stop codons. Thus, one does not need to express the library in suppressor strains. Four different TSAR libraries were expressed in *Escherichia coli* contg. recombinant M13 phage or phagemids. Specific members of the libraries of 27-42-residue peptides were found to bind with high affinity to anti-carcinoembryonic antigen monoclonal antibodies, calmodulin, polystyrene, metal ions, etc.

RE.CNT 228 THERE ARE 228 CITED REFERENCES AVAILABLE FOR THIS RECORD
ALL CITATIONS AVAILABLE IN THE RE FORMAT

L8 ANSWER 13 OF 24 CAPLUS COPYRIGHT 2006 ACS on STN
AN 2000:825787 CAPLUS
DN 134:111922
TI Crystal structure of plantacyanin, a basic blue cupredoxin from spinach
AU Binele, Oliver; Mehrlisch, Zoltan; Nalbandyan, Robert; Messerschmidt, Albrecht
CS Max-Planck-Institut für Biochemie, Abteilung Strukturforchung, Martinsried, 82152, Germany
SO JBC, Journal of Biological Inorganic Chemistry (2000), 5(5), 666-672
CODEN: JBICPA; ISSN: 0949-8257
PB Springer-Verlag
DT Journal
LA English
AB The crystal structure of the basic blue protein, plantacyanin (***SBP***) from spinach, was solved to a resolu. of 2.05 ÅNG. by mol. replacement using the homologous protein from cucumber (***CBP***) as a model. Although the sequence identity of 58% between both proteins was only moderate, the 3-dimensional structures turned out to be highly similar and the buried residues, which formed the hydrophobic core of the protein, were almost completely conserved. However, the redox potentials of both proteins differ by 40 mV, and a comparison of the 2 structures led to a single lys residue replacing a pro residue in the ***CBP*** sequence, which caused a shift of the peptide chain and thus a subtle distortion of the Cu ligand geometry in respect to ***CBP***. The crystal contained 3 monomers of ***SBP*** in the asym. unit which showed considerable variations in outer loop regions owing to crystal packing, but not in the regions presumed to be essential for redox partner recognition and redox potential fine tuning of the Cu centers. Still, bond length variations at the Cu site were at the same scale between the monomers of ***SBP*** as they were with respect to ***CBP***, indicating that in the

oxidized state the protein does not impose a high conformational strain on the Cu.

RE.CNT 33 THERE ARE 33 CITED REFERENCES AVAILABLE FOR THIS RECORD
ALL CITATIONS AVAILABLE IN THE RE FORMAT

L8 ANSWER 14 OF 24 CAPLUS COPYRIGHT 2006 ACS on STN
AN 2001:820842 CAPLUS
DN 136:128799
TI A smooth blood pressure control is obtained over 24 h by delapril in mild to moderate essential hypertensives
AU Omboni, Stefano; Fogari, Roberto; Mancia, Giuseppe
CS Clinica Medica, Ospedale S. Gerardo, Monza, Italy
SO Blood Pressure (2001), 10(3), 170-175
CODEN: BLPREG; ISSN: 0803-7051
PB Taylor & Francis
DT Journal
LA English

AB Objective: To assess the homogeneity of the antihypertensive effect of delapril over 24 h. Design and methods: After 2 wk of placebo 50 mild to moderate essential hypertensives (age 54.4±5.5 yr) were subjected to 8 wk of treatment with delapril 30 mg once daily. At the end of each period, blood pressure (BP) was assessed by conventional sphygmomanometry (clinic or ***CBP***) and ambulatory (A) BP monitoring. Twenty-four-hour means, trough-to-peak ratio (T/P) and smoothness index (SI, the ratio between the av. of the 24-h BP changes after T and its std. deviation) were calcd. for systolic (S) and diastolic (D) BP. Results: ***CBP*** and ABP were significantly reduced by treatment. Pulse pressure (PP, the ***SBP*** -DBP difference) was also significantly (p < 0.01) reduced by delapril (5.7±6.2 and 3.3±3.8 mmHg, CPP and APP). The median T/P was higher (0.51 and 0.62, ***SBP*** and DBP) in the 43 responders at trough than in the whole group (0.44 and 0.51). The SI was similarly high in the whole group (1.3±0.6 and 1.4±0.6, ***SBP*** and DBP) and in the responders (1.4±0.5 and 1.5±0.6). Conclusions: Delapril effectively and smoothly reduces BP over 24 h, this effect being evident also on PP, a parameter with a relevant prognostic value.

RE.CNT 34 THERE ARE 34 CITED REFERENCES AVAILABLE FOR THIS RECORD
ALL CITATIONS AVAILABLE IN THE RE FORMAT

L8 ANSWER 15 OF 24 CAPLUS COPYRIGHT 2006 ACS on STN
AN 2003:28698 CAPLUS
TI Psychosocial demands and ambulatory blood pressure: a field assessment approach
AU Kamarek, Thomas W.; Janicki, Denise L.; Shiffman, Saul; Polk, Deborah E.; Muldoon, Matthew F.; Liebenauer, Laura L.; Schwartz, Joseph E.
CS Department of Psychology, University of Pittsburgh, Pittsburgh, PA, 15260, USA
SO Physiology & Behavior (2002), 77(4-5), 699-704
CODEN: PHBEH4; ISSN: 0031-9384
PB Elsevier Science Inc.
DT Journal
LA English
AB Ambulatory blood pressure (ABP) has been shown to have independent prognostic value, over and beyond the effects of clinic blood pressure (***CBP***) measures. We have examd. the role of psychosocial demands in understanding ABP, using an electronic diary to measure ongoing experience in the field at the time of each blood pressure reading (ecol. momentary

assessment). In our previous work, several psychosocial factors were shown to be associated, within-person, with acute fluctuations in ABP in a healthy adult sample. Here, we replicate these findings in a new sample, and we also examine associations of the same variables with mean ABP (between-person) over a 6-day period. Five measures assumed to be markers of psychosocial demands (neg. affect, arousal, task demand, decisional control, and social conflict) were shown here to be independently associated with ABP fluctuations during daily life, after adjustment for posture, activity, and substance use. Two of these, measures of task demand and decisional control, were also associated with mean ambulatory systolic blood pressure (***SBP***), and these latter associations persisted after controlling for ***CBP***. These results support the possibility that psychosocial factors may account for some of the unique predictive value associated with ABP, and they support the value of these field assessment methods.

RE.CNT 19 THERE ARE 19 CITED REFERENCES AVAILABLE FOR THIS RECORD
ALL CITATIONS AVAILABLE IN THE RE FORMAT

L8 ANSWER 16 OF 24 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN
AN 2003343136 EMBASE
TI Usefulness of home blood pressure measurement in the morning in type 2 diabetic patients.
AU Kamoi K.; Miyakoshi M.; Soda S.; Kaneko S.; Nakagawa O.
CS Dr. K. Kamoi, Department of Medicine, Nagaoka Red Cross Hospital, Nagaoka, Niigata, 940-2085, Japan. kkan-int@nagaoka-hp.jp
SO Diabetes Care, (2002) Vol. 25, No. 12, pp. 2218-2223. .
Refs: 24
ISSN: 0149-5992 CODEN: DICAID

CY United States
DT Journal; Article
FS 006 Internal Medicine
LA English
SL English
ED Entered STN: 1 Sep 2005
AB Last Updated on STN: 1 Sep 2005

OBJECTIVE - Recently, repeated home blood pressure (HBp) measurements in the morning for a long period have been shown to have a stronger predictive power for mortality in patients with hypertension than occasional casual/clinic blood pressure (***CBP***) measurements. We studied whether HBp in the morning in type 2 diabetic patients is useful for prediction of diabetic complications. RESEARCH DESIGN AND METHODS - The occurrence of diabetic complications (nephropathy, retinopathy, coronary heart disease [CHD], and cerebrovascular disease [CVD]) were examined in relation to morning HBp as well as to ***CBP*** in 170 type 2 diabetic patients treated with antidiabetic and antihypertensive drugs. Blood pressure was measured at the clinic during the day and at home after awakening in the morning. Clinic hypertension (CH) and morning hypertension (MH) were defined as systolic blood pressure (***SBP***) .gtorag.130 mmHg and/or diastolic blood pressure (DBP) .gtorag.85 mmHg. The relation of CH and MH to the prevalence of these events was examined. RESULTS - There were no significant differences in the prevalence of nephropathy, retinopathy, CHD, and CVD between the two groups with (n = 133) and without CH (n = 39), whereas the prevalences of these events in the patients with MH (n = 97) were significantly higher (P < 0.05) than in those without MH (n = 73). The prevalence of nephropathy was highly

associated with systolic MH. CONCLUSIONS - Elevations of HBp in the morning in diabetic patients are strongly related to microvascular and macrovascular complications, especially nephropathy. It is concluded that the control of MH may prevent vascular complications in type 2 diabetic patients.

L8 ANSWER 17 OF 24 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN
AN 2003031628 EMBASE
TI Effects of GABA supplementation on blood pressure and safety in adults with mild hypertension.
AU Matsuda F.; Ueno H.; Tadano K.; Suyama T.; Imai T.; Suzuki T.; Magata K.; Kikuchi N.; Kameyuki K.; Nakamichi N.; Kumagai H.; Saruta T.
SO Japanese Pharmacology and Therapeutics, (2002) Vol. 30, No. 11, pp. 963-972. .
Refs: 27
ISSN: 0386-3603 CODEN: YACHDS

CY Japan
DT Journal; Article
FS 018 Cardiovascular Diseases and Cardiovascular Surgery
SO 037 Pharmacology
037 Drug Literature Index
LA Japanese
SL English; Japanese
ED Entered STN: 30 Jan 2003
AB Last Updated on STN: 30 Jan 2003

The purpose of this study is to evaluate the effects of gamma-aminobutyric acid (GABA) supplementation on blood pressure (BP) and safety in adults with mild hypertension. The optimal amount of daily GABA supplementation for reducing BP was first investigated in adults with systolic blood pressure (***SBP***) between 130 and 180mmHg. In the dose of 0, 20, 40 and 80mg of GABA per day, the significant BP reduction was observed with 80 mg. To study long-term effects of GABA on BP along with safety issues by oral treatment, an eight-week double-blind cross-over clinical trial was conducted. Fifty men and women were assigned at random by either GABA treatment or control group. The subjects took either four tablets of GABA (80mg) or placebo per day during the study period. Using home blood pressure (HBp) monitoring, ***SBP*** and diastolic blood pressure (DBP) were measured twice per day (morning and night). Clinic blood pressure (***CBP***) was also measured every two weeks. The major result of this study was that ***SBP*** and DBP measured in the morning were significantly reduced by 10 and 5mmHg (P < 0.05) compared to baseline BP in the GABA treatment group, and that of delta ***SBP*** and DBP between groups was significantly different (P < 0.05). ***SBP*** and DBP of ***CBP*** also reduced progressively with time. The physical examination revealed negative and there was no report on physical discomfort or laboratory data. The results of this study confirmed that daily supplementation of 80 mg of GABA reduces BP in adults with mild hypertension.

L8 ANSWER 18 OF 24 CAPLUS COPYRIGHT 2006 ACS on STN
AN 2003:39547 CAPLUS
DN 138:299269
TI Overview of tag protein fusions: from molecular and biochemical fundamentals to commercial systems
AU Terpe, K.
CS Technical Consultant of the IBA GmbH, Protein expression/purification and

50 nucleic acids, Goettingen, 37079, Germany
 CODEN: AMBIDG; ISSN: 0175-7598
 PB Springer-Verlag
 DT Journal; General Review
 LA English
 AB A review. In response to the rapidly growing field of proteomics, the use of recombinant proteins has increased greatly in recent years. Recombinant hybrid contg. a polypeptide fusion partner, termed affinity tag, to facilitate the purifn. of the target polypeptides are widely used. Many different proteins, domains, or peptides can be fused with the target protein. The advantages of using fusion proteins to facilitate purifn. and detection of recombinant proteins are well-recognized. Nevertheless, it is difficult to choose the right purifn. system for a specific protein of interest. This review gives an overview of the most frequently used and interesting systems: Arg-tag, ***calmodulin*** - ***binding*** **peptide***, cellulose-binding domain, DsbA, c-myc-tag, glutathione S-transferase, FLAG-tag, HA-tag, His-tag, maltose-binding protein, NusA, S-tag, ***SBP***-tag, Strept-tag, and thioredoxin.
 RE.CMT 129 THERE ARE 129 CITED REFERENCES AVAILABLE FOR THIS RECORD
 ALL CITATIONS AVAILABLE IN THE RE FORMAT

L8 ANSWER 19 OF 24 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN
 AN 2004216028 EMBASE
 TI Clinical analysis of characteristics in the adolescent patients with essential hypertensive disease and motor intervention.
 AU Di R.-J.; Hua Q.
 CS R.-J. Di, Division of Health, Outpatient Department, Chinese People's Armed Police Force, Beijing 100089, China. djrz2003@yahoo.com.cn
 SO Chinese Journal of Clinical Rehabilitation, (2003) Vol. 7, No. 15, pp. 2180-2181.
 Refs: 8
 ISSN: 1671-5926 CODEN: ZLKRHH
 CY China
 DT Journal; Article
 FS 007 Pediatrics and Pediatric Surgery
 LA Chinese
 SL English; Chinese
 ED Last Updated on STN: 4 Jun 2004
 AB Aim. To investigate the correlation among episode, blood pressure, configuration of left ventricle and endothelial function in the teenagers with essential hypertensive disease (EH), and analyze the effect of motor intervention. Methods. Thirty-two adolescent patients with mild or moderate EH, aged 14-25 years, and twenty sex, age and body mass index (BMI) matched normotensive controls underwent 8 week aerobic exercise intervention, inquired ill history, personal history and family history. Ambulatory blood pressure monitoring (ABPM) and pulsed Doppler ultrasonography were applied in the all subjects for 24 hours. The supine position blood pressure and standing position blood pressure were measured with an arm sphygmomanometer after the subjects had rested for at least 15 minutes. Results. Approximately 94% of adolescent patients of mental labor with EH have a positive family history of EH, with a significant matrix effect. The incidence of obesity was higher and BMI was lower in the EH group compared with the control group. Clinical blood pressure)

CBP) was positively correlated with ABP. CR was positively correlated to the average systolic blood pressure (***SBP***), diurnal supine position BP in the EH patients ($r=0.5, 0.5, 0.4$). The clinical BP, 24 hour average ***SBP*** and diurnal ***SBP*** were significantly lower after motor intervention, compared with those before motor intervention. Conclusion. Highly variability of blood pressure, a family history of hypertension and obesity are the significant characteristics of adolescent patients with EH. The lower BMI, positive family history, obesity and inaccable adolescent persons are the high-risk group of EH. BMI, ***SBP*** and sympathetic nerve activity may be one of the influence factors of left ventricle reconstruction. Aerobic exercise is an efficient intervention treatment for ZEH in adolescent.

L8 ANSWER 20 OF 24 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN
 AN 2003058976 EMBASE
 TI Effectiveness and cost comparison of two strategies for hepatitis B vaccination of schoolchildren.
 AU Guay M.; Cloutier A.-M.; Blackburn M.; Baron G.; De Wals P.; Roy C.; Desrochers J.; Milord F.
 CS Dr. M. Guay, Direction de la Sante Publique, de la Planification et de l'eval., Regie Regionale Sante et Serv. Soc., 1255 Beauregard, Longueuil, Que., 14K 2M3, Canada. m.guay@rssi16.gouv.qc.ca
 SO Canadian Journal of Public Health, (2003) Vol. 94, No. 1, pp. 64-67.
 Refs: 23
 ISSN: 0008-4263 CODEN: CJPHE4
 CY Canada
 DT Journal; Article
 FS 004 Microbiology
 LA English
 SL English; French
 ED Last Updated on STN: 20 Feb 2004
 AB Context: In 1994, immunization against hepatitis B was implemented in schools in Quebec, targeting grade 4 students. In 1996-1997 and 1997-1998, one local Community Service Centre (CISC) replaced the school-based program in its district with vaccination offered in community clinics after school hours. The aim of the current study was to compare the effectiveness and costs of school-based and clinic-based programs. Methods: Vaccination coverage data were collected in the CISC with the clinic-based program (***CBP***), and in three matched CISCs with a school-based program (***SBP***), from 1994 to 2000. Surveys were conducted to estimate costs to parents, to schools and to CISCs in 1997-1998. Results: With the implementation of the ***CBP***, the vaccination coverage fell to 73%, compared with over 90% in the SBPs. Coverage increased to 90% when the ***CBP*** was abandoned. Costs to the CISC were not much lower in the ***CBP***. Societal costs were \$63 per student vaccinated in the ***CBP***, and \$106 per \$40 in the SBPs. Conclusion: Results demonstrate the advantage of a ***SBP*** over a ***CBP*** for the immunization of schoolchildren.

L8 ANSWER 21 OF 24 CAPLUS COPYRIGHT 2006 ACS ON STN
 AN 2005:90160 CAPLUS
 DN 143:100509
 T1 Petrochemistry of Variscan granitoids of Central Europe: correlation of
 Variscan granitoids of the Tisia and Pelsonia terranes with granitoids of
 the Moldanubium, western Carpathian and southern Alps. A review: part I
 AU Buda, Gyorgy; Ulych, Jaromir; Koller, Friedrich
 CS Department of Mineralogy, Eotvos Lorand University, Budapest, Hung.
 SO Acta Geologica Hungarica (2004), 47(2-3), 117-138
 CODEN: AGHUE7; ISSN: 0236-5278
 PB Akademiai Kiado
 DT Journal: General Review
 LA English
 AB A review. Three major groups (A-C) of Central European Variscan
 granitoids can be distinguished based on petrol. and chem. data. Group A
 are low-K, high-Na, calc-alk., alkali-calcic, met/peraluminous, I- and
 S-type, ironbimorphic (slightly granodioritic)-suite, mostly magmatic
 granitoids that formed at the early stage of continent-continent collision
 (353-356 Ma). These types of granitoids occur in the northern part of the
 Central Bohemian Plutons (***CBP***) in the Moldanubian Zone or in the
 Austroalpine Zone of the outer belt of the Western Carpathian Plutons
 (WCP). The granitoid melt source originated from partially melted oceanic
 and continental crusts due to compression. Group B are high-K, high-Mg,
 calc-alk., metaluminous, I-type, monzonitic-suite granitoids with
 lamprophyre-derived small, ultrapotassic, Mg-rich intrusions that formed
 in the post-collision zone, where the melts originated from the partially
 melted, uplifted, Li-rich mantle and continental crust, due to extension
 (334-354 Ma) after earlier compression. These intrusions can be found in
 the southern part of the ***CBP***, the eastern part of Southern
 Bohemian Plutons (***SBP***) and northwestern part of the Tisia
 Terrain. Later on (314-303 Ma), as a result of interaction of melts
 originated from depleted mantle and partial melted lower crust, low-K,
 high-Na, calc-alk.-type granitoids formed during extension, occurring in
 the inner part of the WCP. Group C are peraluminous, S- or S/A-type
 granodioritic-suite, small intrusions with some K-subalkaline and alk.
 characters, that formed in post-orogenic or probably rifting settings at
 the main tectonic zones, e.g. the Periadriatic-Balaton Lineament (Velece
 Mts, Gemericum) during the Lower Permian (274-+-1.7 Ma). The most
 unstable part of the Variscan orogenic belt was where the high K,
 Mg-calc-alk. granitoid and ultrapotassic intrusions occur (Massif Central,
 Vosges, Black Forest, the southern part of the ***CBP***, the eastern
 part of the ***SBP*** and the northwestern part of the Tisia Terrain).
 They formed the innermost part of the Variscan Belt; only the Tisia
 Terrain occurs in allochthonous positions, which originated from the
 Moldanubian Zone and were completely sepd. from it since mid-Cretaceous
 times.
 RE.CNT 58 THERE ARE 58 CITED REFERENCES AVAILABLE FOR THIS RECORD
 ALL CITATIONS AVAILABLE IN THE RE FORMAT
 L8 ANSWER 22 OF 24 CAPLUS COPYRIGHT 2006 ACS ON STN
 AN 2004:838610 CAPLUS
 DN 141:312238
 T1 DNA microarray analysis of gene expression in the diagnosis of estrogen
 IN receptor positive- and negative-breast cancer
 PA Erlender, Mark G.; Ma, Xiao-Jun; Wang, Wei; Wittliff, James L.
 SO PCT Int. Appl., 226 pp.

CODEN: PIXXD2
 DT Patent
 LA English
 FAN.CNT 2
 PATENT NO.-----
 KIND DATE APPLICATION NO. DATE
 PI WO 2004079014 A2 20040916 WO 2002-XA2004006736 20040304
 W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BW, BY, BZ, CA, CH,
 CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, EG, ES, FI, GB, GD,
 GE, GH, GM, GR, GU, HU, ID, IL, IN, IS, JP, KE, KG, KR, KZ, LC,
 LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MY, NI,
 NO, NZ, OM, PG, PH, PL, PT, RO, RU, SC, SD, SE, SG, SK, SL, SY,
 TJ, TM, TN, TR, TT, TZ, UA, UG, US, UZ, VC, YU, ZA, ZM, ZW
 RW: BW, GH, GM, KE, LS, MW, MZ, SD, SI, SZ, TG, UG, ZM, ZW, AM, AZ,
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 SK, TR, BF, BD, CF, CG, CI, CM, GN, GQ, GW, ML, MR, NE, SN, TD, TG
 TD, TG
 WO 2004079014 A2 20040916 WO 2004-US6736 20040304
 WO 2004079014 A3 20050331
 W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BW, BY, BZ, CA, CH,
 CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, EG, ES, FI, GB, GD,
 GE, GH, GM, GR, GU, HU, ID, IL, IN, IS, JP, KE, KG, KR, KZ, LC,
 LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MY, NI,
 NO, NZ, OM, PG, PH, PL, PT, RO, RU, SC, SD, SE, SG, SK, SL, SY,
 TJ, TM, TN, TR, TT, TZ, UA, UG, US, UZ, VC, YU, ZA, ZM, ZW
 RW: BW, GH, GM, KE, LS, MW, MZ, SD, SI, SZ, TG, UG, ZM, ZW, AM, AZ,
 ES, FI, FR, GB, GR, GU, HU, IE, IT, LU, LU, MG, CH, CY, CZ, DE, DK, EE,
 SK, TR, BF, BD, CF, CG, CI, CM, GN, GQ, GW, ML, MR, NE, SN, TD, TG
 GN, GQ, GW, ML, MR, NE, SN, TD, TG
 PRAI US 2003-651942P 20030304
 WO 2004-US6736 A 20040304
 AB The invention relates to the identification and use of gene expression
 profiles, or patterns, suitable for identification of populations that are
 pos. and neg. for estrogen receptor expression. The gene expression
 profiles may be embodied in nucleic acid expression, protein expression,
 or other expression formats, and may be used in the study and/or diagnosis
 of cells and tissue in breast cancer as well as for the study and/or diagn.
 of prognosis of a patient, including breast cancer survival.
 L8 ANSWER 23 OF 24 CAPLUS COPYRIGHT 2006 ACS ON STN
 AN 2005:429317 CAPLUS
 DN 142:478406
 T1 Streptavidin and ****calmodulin**** - ****binding**** ****peptide****
 IN tags for use in affinity purification of proteins and identifying
 protein-protein interactions
 IN Berman, Jeffrey C.; Carstens, Carsten-Peter; Novoradovskaya, Natalia;
 PA Bagga, Rajesh; Baschore, Lee Scott
 SO U.S. Pat. Appl. Publ., 46 pp.
 CODEN: USXXCO
 DT Patent
 LA English
 FAN.CNT 2
 PATENT NO.-----
 KIND DATE APPLICATION NO. DATE
 PI US 2005106663 A1 20050519 US 2003-712137 20031113
 WO 2005049639 A2 20050602 WO 2004-US37819 20041112
 W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BW, BY, BZ, CA, CH,

CU, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, EG, ES, FI, GB, GD, GE, GH, GM, GR, GU, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MX, MY, NA, NI, NO, NZ, OM, PG, PH, PL, PT, RO, RU, SC, SD, SE, SG, SK, SL, SY, TJ, TM, TN, TR, TT, TZ, UA, UG, US, UZ, VC, VN, YU, ZA, ZM, ZW

RM: BW, GH, GM, KE, LS, MW, MZ, NA, SD, SL, SZ, TZ, UG, ZM, ZW, AM, AZ, BY, BG, CA, CH, CN, CU, CY, EE, EG, ES, FI, FR, GB, GR, GU, HU, IE, IS, IT, LU, MC, NL, PL, PT, RO, SE, SI, SK, TR, BF, BJ, CF, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE, SN, TD, TG

US 2005158711 A1 20050721 US 2004-987388 20041112

PRAI US 2003-712137 A 20031113

AB The invention provides for polynucleotides and vectors comprising at least two tag sequences. The invention also provides for polynucleotides and vectors comprising a ***streptavidin*** ***binding***

peptide sequence and a ***calmodulin*** ***binding***

peptide sequence. The invention also provides for polynucleotides and vectors wherein a gene of interest is fused in frame to at least two tag sequences, for example, a ***streptavidin*** ***binding***

peptide sequence and a ***calmodulin*** ***binding***

peptide sequence. The invention also provides for the chimeric proteins encoded by these polynucleotides. The invention also provides for methods of using the polynucleotides. The invention also provides and isolating protein complexes or identifying a binding partner for a protein of interest.

L8 ANSWER 24 OF 24 CAPLUS COPYRIGHT 2006 ACS on STN

AN 2005:58356 CAPLUS

DN 142:129782

T1 Method of screening for improved specific activity of enzymes using fused

IN Enzymes

PA Fukuyama, Shiro

PA Novozymes A/S, Den.

SO PCT Int. Appl., 42 pp.

CODEN: PIXXD2

DT Patent

LA English

PAN.CNT 1

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2005005654	A1	20050120	WO 2004-DK495	20040709
W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BW, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, EG, ES, FI, GB, GD, GE, GH, GM, GR, GU, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MX, MY, NA, NI, NO, NZ, OM, PG, PH, PL, PT, RO, RU, SC, SD, SE, SG, SK, SL, SY, TJ, TM, TN, TR, TT, TZ, UA, UG, US, UZ, VC, VN, YU, ZA, ZM, ZW				
RM: BW, GH, GM, KE, LS, MW, MZ, NA, SD, SL, SZ, TZ, UG, ZM, ZW, AM, AZ, BY, BG, CA, CH, CN, CU, CY, EE, EG, ES, FI, FR, GB, GR, GU, HU, IE, IS, IT, LU, MC, NL, PL, PT, RO, SE, SI, SK, TR, BF, BJ, CF, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE, SN, TD, TG				

PRAI DK 2003-1056 A 20030711

AB This invention relates to a method for screening libraries of enzyme variants for changes in specific activity by expression of a fusion protein consisting of at least two enzymes. By using one enzyme as a

marker changes in specific activity for the other enzyme can be screened efficiently.

RE.CNT 2 THERE ARE 2 CITED REFERENCES AVAILABLE FOR THIS RECORD

ALL CITATIONS AVAILABLE IN THE RE FORMAT

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(FILE 'HOME' ENTERED AT 12:30:15 ON 07 APR 2006)

INDEX 'ADISCTI, ADISINSIGHT, ADISNEMS, AGRICOLA, ANABSTR, ANTE, AQUALINE, AQUASCI, BIOENG, BIOSIS, BIOTECHABS, BIOTECHDS, BIOTECHNO, CABA, CAPLUS, CEABA-VTB, CIN, CONFSCI, CROPB, CROPU, DDFB, DISSABS, DRUGB, DRUGMONOC2, DRUGU, EMBAL, EMBASE, ESBIOBASE, ...' ENTERED AT 12:30:39 ON 07 APR 2006

SEA (STREPTAVIDIN (W) BIND? (W) (PROTEIN OR PEPTIDE)) OR SBP

1954	FILE ADISCTI
131	FILE ADISINSIGHT
53	FILE ADISNEMS
149	FILE AGRICOLA
19	FILE ANABSTR
13	FILE ANTE
8	FILE AQUALINE
58	FILE AQUASCI
71	FILE BIOENG
5327	FILE BIOSIS
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109	FILE BIOTECHDS
362	FILE BIOTECHNO
631	FILE CABA
3826	FILE CAPLUS
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54	FILE CIN
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27	FILE CROPU
3	FILE DDFB
1363	FILE DDFU
397	FILE DISSABS
3	FILE DRUGB
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L1

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64 FILE NTIS
1 FILE NUTRACEUT
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3568 FILE PASCAL
15 FILE PHAR
6 FILE PHARMATL
8 FILE PHIN
472 FILE PROT
4 FILE RDISCLOSURE
4262 FILE SCISEARCH
2078 FILE TOXCENTER
2 FILE VETU
18 FILE VETU
13 FILE WATER
296 FILE WPIDS
1 FILE WPIDV
296 FILE WPINDEX
QUE (STREPTAVIDIN (W) BIND? (W) (PROTEIN OR PEPTIDE)) OR SBP
-----
SEA (CALMODULIN (W) BIND? (W) (PROTEIN OR PEPTIDE)) OR CBP
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7 FILE ADISINSIGHT
8 FILE ADISNEMS
123 FILE AGRIOLA
63 FILE ANABSTR
3 FILE ANTE
7 FILE AQUALINE
32 FILE AQUASCI
102 FILE BIOENG
3400 FILE BIOSIS
150 FILE BIOTECBAS
150 FILE BIOTECBDS
1595 FILE BIOTECBNO
287 FILE CABA
4239 FILE CAPLUS
20 FILE CEABA-VTB
29 FILE CIN
62 FILE CONFSCI
32 FILE CROPU
243 FILE DDFB
313 FILE DDFU
2 FILE DISSABS
1 FILE DRUGB
329 FILE DRUGNOG2
41 FILE DRUGU
3038 FILE EMBAL
1948 FILE EMBASE
10 FILE ESBIOBASE
42 FILE FSTU
11050 FILE GENBANK
7 FILE HEALSAFE
384 FILE IFIPAT
19 FILE INSDRUGNEMS
1 FILE INSPRODUCT
5 FILE INRESEARCH
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L2

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1021 FILE JICST-EPLUS
1644 FILE LIFESCI
2932 FILE MEDLINE
13 FILE NIOSHTIC
115 FILE NTIS
7 FILE OCEAN
972 FILE PASCAL
5 FILE PHAR
4 FILE PHARMATL
1 FILE PHIC
35 FILE PHIN
714 FILE PROT
3 FILE PROUSDR
3680 FILE SCISEARCH
1103 FILE TOXCENTER
3 FILE VETU
18 FILE WATER
260 FILE WPIDS
1 FILE WPIDV
260 FILE WPINDEX
QUE (CALMODULIN (W) BIND? (W) (PROTEIN OR PEPTIDE)) OR CBP
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SEA L1 AND L2
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1 FILE ANABSTR
1 FILE BIOENG
8 FILE BIOSIS
4 FILE BIOTECBAS
4 FILE BIOTECBDS
1 FILE BIOTECBNO
12 FILE CAPLUS
1 FILE CEABA-VTB
1 FILE DDFU
1 FILE DISSABS
3 FILE DRUGU
12 FILE EMBASE
2 FILE ESBIOBASE
6 FILE GENBANK
3 FILE IFIPAT
2 FILE JICST-EPLUS
1 FILE LIFESCI
10 FILE MEDLINE
1 FILE NTIS
8 FILE PASCAL
8 FILE SCISEARCH
5 FILE TOXCENTER
4 FILE WPIDS
4 FILE WPINDEX
QUE L1 AND L2
-----
L3
FILE 'CAPLUS, EMBASE, MEDLINE, BIOSIS, PASCAL, SCISEARCH, GENBANK,
TOXCENTER, BIOTECBAS, WPIDS, DRUGU, IFIPAT, ESBIOBASE, JICST-EPLUS,
ANABSTR, BIOENG, BIOTECBNO, CEABA-VTB, DISSABS, LIFESCI, NTIS' ENTERED AT
12:35:23 ON 07 APR 2006
94 S L3
L4
L5 39 DUP REM L4 (55 DUPLICATES REMOVED)
```

L7 1 S L5 AND PY<=2003

FILE 'CAPIUS', EMBASE, MEDLINE, BIOSIS, PASCAL, SCISEARCH' ENTERED AT
12:38:54 ON 07 APR 2006

L6 58 S L3
L7 24 DUP REM L6 (34 DUPLICATES REMOVED)
L8 24 SORT L7 PY

=> log h
COST IN U.S. DOLLARS
FULL ESTIMATED COST
DISCOUNT AMOUNTS (FOR QUALIFYING ACCOUNTS)
CA SUBSCRIBER PRICE

SINCE FILE ENTRY	TOTAL SESSION
105.79	176.82
SINCE FILE ENTRY	TOTAL SESSION
-9.00	-9.00

SESSION WILL BE HELD FOR 60 MINUTES
STN INTERNATIONAL SESSION SUSPENDED AT 12:40:13 ON 07 APR 2006